

HB 6393

March 15, 2013

Distinguished members of the Public Health Committee.

My name is Jean Rexford and I am the Executive Director of the CT center for Patient Safety. I am here today in <u>opposition</u> to House Bill 6393 – AAC the Professional Standard of Care for Emergency Medical Care Providers.

In 2007 the Institute of Medicine issued recommendation in providing emergency room care. "While today's emergency care system offers significantly more medical capability than was available in years past, it continues to suffer from sever fragmentation, an absence of system wide coordination and a lack of accountability. To address these challenges and chart a new direction for emergency care, the committee envisions a system in which all communities will be served by well-planned and highly coordinated emergency care services that are accountable for performance and serve the needs of patients of all ages within the system."

While a few of our hospitals have implemented evidence based changes in care delivery, most of our hospitals and emergency rooms have not.

This past December, I was privileged to be on a panel at the Institute for Healthcare Improvement – a panel on the patient perspective on hospital experience. While at the conference, I attended a workshop on physical and environmental designs of emergency rooms that have been shown to reduce harm, lower costs and increase patient satisfaction. Using an engineer's approach, studies have broken down the delivery design in emergency room and have figured out optimum care depending on the numbers of ER patients each year – whether that number is 400,000 visits or 30,000 patient visits each year. How many of our hospitals have addressed the system changes that must take place in order to reduce error?

Healthcare harm is pervasive throughout our healthcare system. Report after report substantiates the problem, Two recent reports:

- Connecticut is the only New England state and one of just three nationally, to have NO hospitals designated in Top Performers by the Joint Commission on Hospital Accreditation.
- Connecticut fared second worst in the country in the percentage of hospitals hit with federal
 penalties for selected quality –of-care measures and in the overall rate of loss in Medicare
 reimbursements associated with those penalties.

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